

JANUARY 2004 MONTHLY REPORT

Health Insurance Risk Sharing Plan (HIRSP) January 2004 Monthly Statistics

	January-04	July-03
BANK SUMMARY	+	
CHECKWRITE	\$6,984,735.85	\$4,985,480.78
BOOK BALANCE (US Bank & State General Account)	\$40,798,764.00	\$35,892,456.00
ENROLLMENT	+	
PLAN 1A	8,082	8,464
PLAN 1B	7,842	6,809
PLAN 2	1,757	1,734
TOTAL	17,681	17,007
NEW APPLICATIONS RECEIVED	608	477
CLAIMS		
CLAIMS PROCESSED	106,648	82,605
AVERAGE PROCESSING DAYS	16	13
CLAIM INVENTORY - OVER 30 DAYS OLD	1,837	1,264
CLAIM INVENTORY - TOTAL	13,832	4,670
CLAIMS DENIED (Non-PBM)	18,250	9,422
CLAIMS DENIED (PBM)	8,470	7,020
CLAIM ACCURACY PERFORMANCE	99.69%	100.00%
CUSTOMER SERVICE - HIRSP		
NUMBER OF CALLS RECEIVED	11,781	9,421
PERCENTAGE OF CALLS ANSWERED	88.3%	87.7%
WRITTEN CORRESPONDENCE - RECEIVED	762	534
WRITTEN CORRESPONDENCE - COMPLETED	794	559
WRITTEN CORRESPONDENCE - INVENTORY	32	63
AVERAGE HOLD TIME FOR TELEPHONE CALLS	5.12	4.49

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Wisconsin Health Insurance Risk-Sharing Plan Breakdown of Incurred Claims and Earned Premium by Quarter and Plan

		3	Q02		
_	Total D	Oollars		Per Member	Per Month
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$16,770,566	\$9,890,939	169.6%	\$658.94	\$388.63
Plan 1B	4,653,354	4,980,237	93.4%	314.39	336.48
Plan 2	3,860,645	1,709,794	225.8%	756.10	334.86
Total	\$25,284,565	\$16,580,970	152.5%	\$557.44	\$365.56
		4	Q02		
	Total D	Oollars		Per Member	Per Month
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$19,438,607	\$10,075,378	192.9%	\$747.61	\$387.50
Plan 1B	5,688,215	5,425,547	104.8%	353.52	337.20
Plan 2	4,149,124	1,743,587	238.0%	800.83	336.53
Total	\$29,275,946	\$17,244,511	169.8%	\$619.31	\$364.79
		1	Q03		
_	Total D	Oollars		Per Member	
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$16,754,164	\$9,643,975	173.7%	\$674.65	\$388.34
Plan 1B	6,800,648	6,382,184	106.6%	355.63	333.74
Plan 2	3,529,044	1,759,919	200.5%	682.34	340.28
Total	\$27,083,855	\$17,786,078	152.3%	\$551.28	\$362.03
			Q03		
_	Total D			Per Member	Per Month
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$19,705,566	\$9,858,100	199.9%	\$773.65	\$387.03
Plan 1B	6,896,226	6,664,640	103.5%	344.42	332.85
Plan 2	4,000,275	1,796,687	222.6%	762.25	342.36
Total	\$30,602,066	\$18,319,427	167.0%	\$603.09	\$361.03
			Q03		
_	Total D			Per Member	Per Month
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$20,230,672	\$10,846,522	186.5%	\$793.73	\$425.55
Plan 1B	7,028,449	7,649,161	91.9%	336.71	366.44
Plan 2	4,562,846	2,062,401	221.2%	877.47	396.62
Total	\$31,821,967	\$20,558,083	154.8%	\$617.16	\$398.71

NOTES: Loss Ratio = Incurred Claims / Earned Premiums

Earned Premium includes Premium Subsidies

Incurred Claims include Provider Contributions

Administrative Expenses are not included in this exhibit

Incurred Claims and Earned Premiums are updated quarterly and restated to reflect

the most current information available as of December 31, 2003

LR Report 3Q03 Exhibit.xls 2/18/2004

Wisconsin Health Insurance Risk Sharing Plan Financial Report Notes For the Period Ending January 31, 2004

These monthly reports do not include the June 30, 2002 CAFR¹ (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

1) Policyholder Retained Earnings, End of Period (page 3 & 9)

The policyholder retained earnings include both assigned and the unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown).

2) Changes to Unaudited Balance Sheet (page 7 & 13)

- "GPR Appropriation Receivable", "State Premium and Deductible Subsidy Receivable", "Unearned GPR Appropriation" and "Unearned State Premium and Deductible Subsidy" were removed since these items are no longer recorded.
- "Unpaid losses" were separated into "Unpaid Medical Loss Liabilities" and "Unpaid Prescription Drug Loss Liabilities".

3) Changes to Unaudited Statement of Revenues, Expenses and Changes in Retained Earnings (page 3 &9)

- "Subsidy Premiums Funded by State of WI", "GPR Revenue from the State of Wisconsin", and "Deductible Subsidy Funded by State of WI" were removed since these items are no longer recorded.
- "Losses" was split into two categories: Medical Losses and Pharmacy Losses. In making this change, all the items reported under the original category were split between Medical and Pharmacy.
- "Refund of Premium Overpayment" reported under the Policyholder section of "Additions to Retained Earnings" was moved and split between the Provider and Insurer sections. This change also impacted Section 8 (Interim Estimates of Surplus/(Deficit) Account Balance for FY 2004) of the Interim Reconciliation schedule.

4) Changes to Interim Reconciliation (page 5, 6, 11 &12)

- "Losses Paid or Approved for Payment" in Section 1 was split into two categories: Medical Losses Paid or Approved for Payment and Pharmacy Losses Paid or Approved for Payment.
- "Increase (Decrease) in Unpaid Losses" in Section 1 was split into two categories: Increase (Decrease) in Unpaid Medical Losses and Increase (Decrease) in Unpaid Pharmacy Losses.
- "Deductible Subsidies" in Section 5 was split into two categories: Deductible Subsidies and Subsidy Coinsurance Out-of-Pocket Max.
- In Section 5 (Subsidy Funding Shares), the words "Non-GPR" were removed from the title "Non-GPR Subsidy Funding Needed by Source in Addition to Section 3 Funding Shares".
- "GPR appropriations under s.20.435(4)(af)", and "Subsidy Funding Needed in Excess of State GPR" were removed as these items are no longer recorded.

¹ CAFR is the State of Wisconsin annual financial report published by DOA (Dept of Admin) and prepared in accordance with GASB (Governmental Accounting Standards Board).

Changes have been made to this report starting with the January 2004 report. These changes are detailed in note 3 of the Financial Reports

Notes on page 2.			Unaudited S	Statement of Reve	enues, Expenses,	and Changes in R	Retained Earnings						
Operating Revenues	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
Gross Premiums	6,671,935	6,855,377	6,865,202	6,999,838	6,976,695	7,025,046	7,117,706	-	-	-	-	-	48,511,799
Premium Subsidized	(322,035)	(330,138)	(293,447)	(378,173)	(318,929)	(343,769)	(375,583)	-	-	-	-	-	(2,362,074)
Net Premium Revenues	6,349,900	6,525,239	6,571,755	6,621,665	6,657,766	6,681,277	6,742,123	-	-	-	-	-	46,149,725
Insurer Assessments	2,676,407	2,676,407	2,676,407	2,676,407	2,676,407	2,676,407	3,230,941	-	-	-	-	-	19,289,383
Total Operating Revenues	9,026,307	9,201,646	9,248,162	9,298,072	9,334,173	9,357,684	9,973,064	-	-	•	-		65,439,108
Operating Expenses													
Medical Losses: Losses Paid or Approved for Payment	6,960,640	8,205,976	6,426,747	5,851,266	6,082,689	7,537,974	11,093,371	_	_	_	_	_	52,158,663
Increase (Decrease) in Unpaid Losses	745,723	301,508	(808,233)	2,017,899	1,613,972	520,699	(4,812,800)	-	-	-	-	-	(421,232)
Provider Contribution	(2,571,321)	(3,205,951)	(1,870,333)	(2,564,228)	(2,894,579)	(3,076,511)	(2,436,326)	-	-	-	-	-	(18,619,249)
Deductible Subsidy Paid Total Medical Losses	44,862 5,179,904	41,166 5,342,699	40,330 3,788,511	23,213 5,328,150	29,376 4,831,458	33,096 5,015,258	64,365 3,908,610	-	-	-			276,408 33,394,590
Total Medical Losses	5,179,904	5,542,099	3,766,311	5,326,130	4,031,436	5,015,256	3,900,010	-	-	-	-	-	33,394,390
Pharmacy Losses:	0.707.040	0.007.007	4 440 000	2 002 004	0.400.400	0.007.004	0.070.405						00 000 744
Losses Paid or Approved for Payment Increase (Decrease) in Unpaid Losses	2,787,916 91,774	2,837,837 579,830	4,448,988 (1,282,762)	3,023,294 281,257	3,126,480 329,078	3,097,064 325,988	2,978,135 8,871	-			-	-	22,299,714 334,036
Drug Rebates	(55,000)	(83,128)	(74,520)	(65,000)	(65,000)	(99,703)	(75,286)	-	-	-	-	-	(517,637)
Subsidy - Coinsurance Out-of-Pocket Max	15,656	15,717	17,253	27,528	18,183	18,233	9,524	-	-	-	-	-	122,094
Total Pharmacy Losses	2,840,346	3,350,256	3,108,959	3,267,079	3,408,741	3,341,582	2,921,244	-	-	-	-	-	22,238,207
Total Losses	8,020,250	8,692,955	6,897,470	8,595,229	8,240,199	8,356,840	6,829,854	-	-	-	-	-	55,632,797
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
DHFS Admin Fees	27,495	45,463	32,376	32,097	25,616	63,298	28,374	-	-	-	-	-	254,719
EDS Admin Fees	161,345	154,701	161,350	163,735	128,267	71,781	72,329	-	-	-	-	-	913,508
UGS Admin Fees	226,059	223,561	240,394	240,592	225,735	234,948	249,725	-	-	-	-	-	1,641,014
Milliman USA Actuarial Services Other Admin Fees	4,899 13,139	10,500 11,402	10,500 19,026	4,273 22,464	10,500 12,412	3,456 21,781	5,696 13,703	-	-	-	-	-	49,824 113,927
Total Administrative Expenses	432,937	445,627	463,646	463,161	402,530	395,264	369,827	-	-	-	-	-	2,972,992
Referral fees	8,015	8,190	7,140	8,225	8,155	6,370	6,265	-	-	-	-	-	52,360
Total Operating Expenses	8,461,202	9,146,772	7,368,256	9,066,615	8,650,884	8,758,474	7,205,946	-	-	-	-	-	58,658,149
Net Operating Income (Loss)	565,105	54,874	1,879,906	231,457	683,289	599,210	2,767,118	-				_	6,780,959
		,	1,010,000			,	_,,,,,,,						-,,
Non-Operating Revenues (Expenses)													
Investment income	32,153	25,292	22,343	33,207	33,025	35,518	36,771	-	-	-	-	-	218,309
Total Non-operating Revenues (Expenses)	32,153	25,292	22,343	33,207	33,025	35,518	36,771	-	-	-	-	-	218,309
Net Income (Loss)	597,258	80,166	1,902,249	264,664	716,314	634,728	2,803,889	-	-	-	-	-	6,999,268
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period Refund of Premium Overpayment	10,418,274	10,586,815	10,136,747	11,564,335	11,686,777	11,832,104	11,859,597	-	-	-	-	-	10,418,274
Current Earnings	168,541	(450,068)	1,427,588	122,442	145,327	27,493	1,472,627	-	-	-	-	-	2,913,950
Retained Earnings, End of Period ⁽¹⁾	10,586,815	10,136,747	11,564,335	11,686,777	11,832,104	11,859,597	13,332,224	-	-	-	-	-	13,332,224
Providers													
Retained Earnings, Beginning of Period	(284,290)	(92,216)	466,114	329,199	369,591	563,089	1,093,317	-	-	-	-	-	(284,290)
Premium Subsidy Underpayment Adj. Current Earnings	- 192,074	558,330	(136,915)	40,392	(224,861) 418,359	894 529,334	- 305,268	-	-	-	-	-	(223,967) 1,906,842
Retained Earnings, End of Period	(92,216)	466,114	329,199	369,591	563,089	1,093,317	1,398,585						1,398,585
In a second													
Insurers Retained Earnings, Beginning of Period	1,516,883	1,814,044	1,842,831	2,511,990	2,664,561	2,639,888	2,770,012	_	_	_	_	_	1,516,883
Premium Subsidy Underpayment Adj.	-	-	-	-	(224,860)	894	-	-	-	-	-	-	(223,966)
Current Earnings	297,161	28,787	669,159	152,571	200,187	129,230	1,099,883	-	-	-	-	-	2,576,978
Retained Earnings, End of Period	1,814,044	1,842,831	2,511,990	2,664,561	2,639,888	2,770,012	3,869,895	-	-	-	-	-	3,869,895
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(1,611,949)	(1,672,467)	(1,729,350)	(1,786,933)	(1,837,674)	(1,885,233)	(1,936,562)	-	-	-	-	-	(1,611,949)
Current Earnings Retained Earnings, End of Period	(60,518) (1,672,467)	(56,883) (1,729,350)	(57,583) (1,786,933)	(50,741) (1,837,674)	(47,559) (1,885,233)	(51,329) (1,936,562)	(73,889) (2,010,451)	-	-		-		(398,502) (2,010,451)
- '													
Total Retained Earnings	10,636,176	10,716,342	12,618,591	12,883,255	13,149,848	13,786,364	16,590,253	-	-		-		16,590,253

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN 2004 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSE AS OF JANUARY 31, 2004

MISC REVENUE	JUL 03	AUG	SEP	ост	NOV	DEC	JAN 04	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-		-	-	-		-	-

													YEAR TO DATE
MISC ADMIN EXP	JUL 03	AUG	SEP	ОСТ	NOV	DEC	JAN 04	FEB	MAR	APR	MAY	JUN	TOTAL
Bank Service Charge						1,270.00							1,270.00
Postage	10,763.50	9,952.00	17,576.02	21,013.56	10,962.02	19,060.57	12,253.37						101,581.04
LAB Audit Fee	1,450.00	1,450.00	1,450.00	1,450.00	1,450.00	1,450.00	1,450.00						10,150.00
Speed Scribe													-
UW Extension													-
NASCHIP	250.00												250.00
Legal Services													-
Assembly Chief Clerk													-
Newspaper Ad													-
Permedion (Independent Review Org.)	675.00												675.00
													-
													-
													-
													-
					•	•		•					-
TOTAL MISC ADMIN EXP	13,138.50	11,402.00	19,026.02	22,463.56	12,412.02	21,780.57	13,703.37	-	-	-	-	-	113,926.04

Wisconsin Health Insurance Risk Sharing Plan Fiscal Year 2004 Interim Reconciliation As Of January 31, 2004

Changes have been made to this report starting with the January 2004 report. These changes are detailed in note 4 of the Financial Reports Notes on page 2.

Increase (Decrease) in Unpaid Medical Losses 745,723 301,508 (808,233) 2,017,899 1,613,972 520,699 (4,812,800) - <th< th=""><th>,158,663 (421,232) ,299,714 334,036 (517,637) ,025,352</th></th<>	,158,663 (421,232) ,299,714 334,036 (517,637) ,025,352
Increase (Decrease) in Unpaid Medical Losses 745,723 301,508 (808,233) 2,017,899 1,613,972 520,699 (4,812,800) - <th< td=""><td>(421,232) ,299,714 334,036 (517,637)</td></th<>	(421,232) ,299,714 334,036 (517,637)
Pharmacy Losses Paid or Approved for Payment 2,787,916 2,837,837 4,448,988 3,023,294 3,126,480 3,097,064 2,978,135 22,299 Increase (Decrease) in Unpaid Pharmacy Losses 91,774 579,830 (1,282,762) 281,257 329,078 325,988 8,871 336	,299,714 334,036 (517,637)
Increase (Decrease) in Unpaid Pharmacy Losses 91,774 579,830 (1,282,762) 281,257 329,078 325,988 8,871 33	334,036 (517,637)
Drug Rebates (55.000) (83.128) (74.520) (65.000) (65.000) (75.286) (51	
	,025,352
Loss Adjustment Expense	.878,896
Total Operating Expense 10,972,005 12,295,640 9,161,006 11,560,102 11,497,904 11,765,056 9,506,565 76,677	,070,090
2. Adjustments to Operating and Administrative Costs	
Total Non-operating Revenue (Expense) 32,153 25,292 22,343 33,207 33,025 35,518 36,771 216	218,309
3. Total Fiscal Year Program Costs to be Split 60% 20% 20% 10,939,852 12,270,548 9,158,663 11,546,895 11,464,879 11,748,138 9,531,612 76,666	,660,587
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)	
Funding Shares	
	,996,351
	,332,118
20% Insurers 2,187,970 2,454,110 1,831,733 2,309,379 2,292,976 2,349,628 1,906,322 15,33:	,332,110
5. Subsidy Funding Shares	
	,362,074
	276,408 122,094
	,760,576
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares	
	.380.289
	,380,287
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)	
	,996,351 .712.407
	,712,407
7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)	,2, .00
Policyholders	
	,149,725
	,760,576 ,910,301
Subtotal 6,732,453 6,912,260 6,922,785 7,050,579 7,024,254 7,076,375 7,191,595 48,910	,510,301
Providers 2,571,321 3,205,951 1,870,333 2,564,228 2,894,579 3,076,511 2,436,326 18,61	,619,249
Insurers <u>2,676,407 2,676,407 2,676,407 2,676,407 2,676,407 3,230,941 19,28</u>	,289,383
Total 11,980,181 12,794,618 11,469,525 12,291,214 12,595,240 12,829,293 12,858,862 86,81	,818,933

^{*} Totals updated 10/29/2004.

Wisconsin Health Insurance Risk Sharing Plan Fiscal Year 2004 Interim Reconciliation As Of January 31, 2004

Changes have been made to this report starting with the January 2004 report. These changes are detailed in note 4 of the Financial Reports Notes on page 2.

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
 Interim Estimate of Surplus/(Deficit) Account Balance for FY 2 Policyholders 	004												
Prior Period Surplus / (Deficit)	10,418,274	10,586,815	10,136,747	11,564,335	11,686,777	11,832,104	11,859,597	-	-	-	-	-	10,418,274
Premium (Including Premium and Deductible Subsidies)	6,732,453	6,912,260	6,922,785	7,050,579	7,024,254	7,076,375	7,191,595	-	-	-	-	-	48,910,301
Less Cost	6,563,912	7,362,328	5,495,197	6,928,137	6,878,927	7,048,882	5,718,968	-	-	-	-	-	45,996,351
Less Refund of Premium Overpayment Monthly Change	168,541	(450,068)	1,427,588	122,442	145,327	27,493	1,472,627	-	-	-		-	2,913,950
Ending Surplus / (Deficit)	10,586,815	10,136,747	11,564,335	11,686,777	11,832,104	11,859,597	13,332,224	-	-	-	-	-	13,332,224
Assigned Surplus to SFY 2004	103,308	93,916	84,524	75,132	65,740	56,348	46,956	_	-	_	_	_	46,956
Unassigned Surplus	10,483,507	10,042,831	11,479,811	11,611,645	11,766,364	11,803,249	13,285,268	-	-	-	-	-	13,285,268
Providers													
Prior Period Surplus / (Deficit)	(284,290)	(92,216)	466,114	329,199	369,591	563,089	1,093,317	-	-	-	-	-	(284,290)
Contribution	2,571,321	3,205,951	1,870,333	2,564,228	2,894,579	3,076,511	2,436,326	-	-	-	-	-	18,619,249
Less Cost Premium Subsidy Underpayment Adj.	2,379,247	2,647,621	2,007,248	2,523,836	2,476,220 224,861	2,547,177 (894)	2,131,058	-	-	-	-	-	16,712,407 223,967
Monthly Change	192,074	558,330	(136,915)	40,392	193,498	530,228	305,268	-	-	-	-	-	1,682,875
Ending Surplus / (Deficit)	(92,216)	466,114	329,199	369,591	563,089	1,093,317	1,398,585	-	-	-	-	-	1,398,585
Insurers													
Prior Period Surplus / (Deficit)	1,516,883	1,814,044	1,842,831	2,511,990	2,664,561	2,639,888	2,770,012	-	-	-	-	-	1,516,883
Assessment	2,676,407	2,676,407	2,676,407	2,676,407	2,676,407	2,676,407	3,230,941	-	-	-	_	_	19,289,383
Less Cost	2,379,246	2,647,620	2,007,248	2,523,836	2,476,220	2,547,177	2,131,058	-	-	-	-	-	16,712,405
Premium Subsidy Underpayment Adj. Monthly Change	297,161	28,787	669,159	152,571	224,860 (24,673)	(894) 130,124	1,099,883	-		-	-		223,966 2,353,012
Ending Surplus / (Deficit)	1.814.044	1.842.831	2,511,990	2,664,561	2,639,888	2.770.012	3.869.895	_	-	_	_	_	3,869,895
3 1 1		, , , , , ,	,- ,	, , , , , , , , , , , , , , , , , , , ,	77								
Unfunded Deductible and Coinsurance Subsidy													
Prior Period Surplus / (Deficit)		(1,672,467)						-	-	-	-	-	(1,611,949)
Monthly Change Ending Surplus / (Deficit)	(60,518)	(56,883)	(57,583)	(50,741)	(47,559)	(51,329)	(73,889)						(398,502) (2,010,451) *
Entiting outputs / (Bellett)	(1,072,407)	(1,723,330)	(1,700,900)	(1,007,074)	(1,000,200)	(1,330,302)	(2,010,431)						(2,010,431)
T. ()	10 000 1==	10.710.0:5	10.010.55:	10 000 0	10.110.0:5	10 700 00 :	10 500 050						40.500.050
Total HIRSP Retained Earnings	10,636,176	10,716,342	12,618,591	12,883,255	13,149,848	13,786,364	16,590,253	-	-	-	-	-	16,590,253

^{*} Totals updated 10/29/2004.

Wisconsin Health Insurance Risk Sharing Plan January 31, 2004 Fiscal Year 2004

Changes have been made to this report starting with the January 2004 report.
These changes are detailed in note 2 of the Financial Reports Notes on page 2.

Unaudited Balance Sheet

Assets	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Cash and Cash Equivalents	35,892,456	37,922,089	44,128,494	45,696,241	39,681,686	46,985,875	40,798,764	-	-	-	-	-
Other Receivables	552,512	489,166	500,455	444,335	515,592	485,306	440,887	-	-	-	-	-
Drug Rebates Receivable	435,243	518,370	592,890	657,890	606,666	706,369	532,476	-	-	-	-	-
Assessments Receivable	2,501,949	377,692	123,199	153,126	122,636	124,833	3,233,477	-	-	-	-	-
Prepaid Items	72,702	62,750	45,174	94,311	83,349	64,288	52,035	-	-	-	-	
Total Assets	39,454,862	39,370,067	45,390,212	47,045,903	41,009,929	48,366,671	45,057,639	-	-	-	-	-
Lieb Wilder and Front Fronts.												
Liabilities and Fund Equity												
Liabilities:	44.040.700	44 404 007	40 000 000	45 070 070	40 400 400	40 704 407	10 700 001					
Unpaid Medical loss Liabilities	14,043,722	14,121,607	13,828,638	15,278,673	16,420,488	16,731,107	13,706,091	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	1,470,342	2,050,172	767,410	1,048,667	1,377,745	1,703,733	1,712,604	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	-	-	-	-	-
Unearned Premiums	10,744,689	5,931,362	14,441,124	11,139,336	6,023,682	14,622,001	11,026,649	-	-	-	-	-
Unearned Assessments	1,080,170	4,810,082	2,334,674	5,292,941	2,674,210	-	495,774	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	819,763	1,080,502	739,775	743,031	703,956	863,466	866,268	-	-	-	-	
Total Liabilities	28,818,686	28,653,725	32,771,621	34,162,648	27,860,081	34,580,307	28,467,386	-	-	-	-	-
Fund Equity:												
Policyholder	10,586,815	10,136,747	11,564,335	11,686,777	11,832,104	11,859,597	13,332,224		_		_	
Providers	(92,216)	466,114	329,199	369,591	563,089	1,093,317	1,398,585	_	_	_	_	_
Insurers	1,814,044	1,842,831	2,511,990	2,664,561	2,639,888	2,770,012	3,869,895	-	-	-	_	_
Unfunded Deductible and Coinsurance Subsidy	(1,672,467)	(1,729,350)	(1,786,933)	(1,837,674)	(1,885,233)	(1,936,562)	(2,010,451)	-	-	-	-	_
Total Retained Earnings	10,636,176	10,716,342	12,618,591	12,883,255	13,149,848	13,786,364	16,590,253					
Total Netallieu Lallilligs	10,030,170	10,7 10,342	12,010,091	12,003,255	13,143,040	13,700,304	10,090,200	-	-	-	-	-
Total Liabilities and Fund Equity	39,454,862	39,370,067	45,390,212	47,045,903	41,009,929	48,366,671	45,057,639	-	-	-	-	-

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN MONTHLY PROVIDER CONTRIBUTION REPORT AS OF JANUARY 31, 2004

PROVIDER SHARE CAL	CULATION FOR TH	HE CURRENT MON	TH - CLAIMS BY CL	AIM TYPE	
REGULAR CLAIMS			USUAL	LESS HIRSP	
	BILLED	U & C	AND	ALLOWED	PROVIDER
CLAIM TYPE / CATEGORY	CHARGES	PERCENTAGE	CUSTOMARY	CHARGES	SHARE
CT 20 & 39/20 PROFESSIONAL	5,905,467.98	26.8%	4,322,802.56	2,525,554.53	1,797,248.03
CT 23 & 39/23 HOSPITAL OUTPATIENT	3,583,801.24	17.1%	2,970,971.23	2,003,974.18	966,997.05
CT 24 & 39/24 OTHER	428,684.41	13.0%	672,912.57	293,858.62	79,053.95
CT 40 & 49/40 HOSPITAL INPATIENT	5,584,123.21	17.8%	4,587,915.63	3,209,230.55	1,378,685.08
CT 41 & 59/41 OTHER	-	13.0%	-	-	-
TOTAL	\$ 15,502,076.84		\$ 12,554,601.99	\$ 8,032,617.88	\$ 4,221,984.11

CROSSOVER CLAIMS	MEDICARE			HIRSP	
	ALLOWED	MEDICARE	HIRSP	DEDUCTIBLE/	PROVIDER
CLAIM TYPE / CATEGORY	CHARGES	PAID	PAID	COINSURANCE	SHARE
CT 30 & 39/30 PROFESSIONAL	529,177.41	413,297.51	98,979.81	13,979.59	2,920.50
CT 31 & 39/31 HOSPITAL OUTPATIENT	1,109,871.12	1,002,540.10	94,845.65	13,279.51	(794.14)
CT 50 & 49/50 HOSPITAL INPATIENT	1,227,752.72	1,168,952.72	52,217.79	6,582.21	-
CT 51 & 59/51 OTHER	78,242.83	60,812.83	17,430.00	ı	-
TOTAL CROSSOVER	\$ 2,945,044.08	\$ 2,645,603.16	\$ 263,473.25	\$ 33,841.31	\$ 2,126.36

[PROVIDER CONTRIBUTION ON THE INCREASE (DECREASE) IN UNPAID LOSSES [\$ (1,787,784.00)]	PROVIDER CONTRIBUTION ON THE INCREASE (DECREASE) IN UNPAID LOSSES \$ (1,787,784.0)
--	--

TOTAL PROVIDER CONTRIBUTION NON-PHARMACY	\$ 2,436,326.47

PHARMACY CLAIMS			USUAL	LESS HIRSP	
	BILLED	U & C	AND	ALLOWED	PROVIDER
CLAIM TYPE / CATEGORY	CHARGES	PERCENTAGE	CUSTOMARY	CHARGES	SHARE
CT 10 & 19/10 PRESCRIPTION DRUG	_				
CLAIMS NOT PROCESSED THROUGH PBM	-	0.00%	-	-	
CT 10 & 19/10 PRESCRIPTION DRUG					
CLAIMS PROCESSED THROUGH PBM	5,014,628.67	0.00%	3,344,803.21	3,344,803.21	-
TOTAL PROVIDER CONTRIBUTION PHARMACY	5,014,628.67		3,344,803.21	3,344,803.21	-

Wisconsin Health Insurance Risk Sharing Plan for the Period Ended January 31, 2004 Calendar Year 2004

Changes have been made to this report starting with the January 2004 report. These changes are detailed in note 3 of the Financial Reports. Notes on page 2

These changes are detailed in note 3 of the Financial Reports Notes on page 2.		l	Jnaudited Sta	tement of Re	evenues, Expe	enses, and Ch	anges in Reta	ained Earning	S				
Operating Revenues	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	7,117,706	-	-	-	-	-	-	-	-	-	-	-	7,117,706
Premium Subsidized	(375,583)	-	-	-	-	-	-	-	-	-	-	-	(375,583)
Net Premium Revenues	6,742,123	-	-	-	-	-	-	-	-	-	-	-	6,742,123
Insurer Assessments	3,230,941	_	-	-	-	-	-	-	-	-	-	_	3,230,941
Total Operating Revenues	9,973,064	-	-	-	-	-		-	-	-	-	-	9,973,064
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment Increase (Decrease) in Unpaid Losses	11,093,371 (4,812,800)	-	-	-	-	-	-	-	-	-	-	-	11,093,371 (4,812,800)
Provider Contribution	(2,436,326)	-	-	_	-	-	-	-	-	_	_	_	(2,436,326)
Deductible Subsidy Paid	64,365	-	-	-	-	-	-	-	-	-	-	-	64,365
Total Medical Losses	3,908,610	-	-	-	-	-	-	-	-	-	-	-	3,908,610
Pharmacy Losses:													
Losses Paid or Approved for Payment	2,978,135	-	_	-	_	_	-	_	_	_	_	_	2,978,135
Increase (Decrease) in Unpaid Losses	8,871	-	-	-	-	-	-	-	-	-	-	-	8,871
Drug Rebates	(75,286)	-	-	-	-	-	-	-	-	-	-	-	(75,286)
Subsidy - Coinsurance Out-of-Pocket Max	9,524	-	-	-	-	-	-	-	-	-	-	-	9,524
Total Pharmacy Losses	2,921,244	-	-	-	-	-	-	-	-	-	-	-	2,921,244
Total Losses	6,829,854	-	-	-	-	-	-	-	-	-	-	-	6,829,854
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
DHFS Admin Fees	28,374	_	-	_	_	-	_	_	-	_	_	_	28,374
EDS Admin Fees	72,329	-	-	-	-	-	-	-	-	-	-	-	72,329
UGS Admin Fees	249,725	-	-	-	-	-	-	-	-	-	-	-	249,725
Milliman USA Actuarial Services	5,696	-	-	-	-	-	-	-	-	-	-	-	5,696
Other Admin Fees	13,703	-	-	-	-	-	-	-	-	-	-	-	13,703
Total Administrative Expenses	369,827	-	-	-	-	-	-	-	-	-	-	-	369,827
Referral fees	6,265	-	-	-	-	-	-	-	-	-	-	-	6,265
Total Operating Expenses	7,205,946	-	-	-	-	-	-	-	-	-	-	-	7,205,946
Net Operating Income (Loss)	2,767,118	-	-	-	-	-	-	-	-	-	-	-	2,767,118
Non-Operating Revenues (Expenses)													
Investment income	36,771	-	-	-	-	-	-	-	-	-	-	-	36,771
Total Non-operating Revenues (Expenses)	36,771	-	-	-	-	-	-	-	-	-	-	-	36,771
Net Income (Loss)	2,803,889												2,803,889
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	11,859,597	-	-	-	-	-	-	-	-	-	-	-	11,859,597
Refund of Premium Overpayment	4 470 007	-	-	-	-	-	-	-	-	-	-	-	4 470 007
Current Earnings Retained Earnings, End of Period ⁽¹⁾	1,472,627 13,332,224	-			-			-			-	-	1,472,627 13,332,224
Retained Earnings, End of Feriod	13,332,224	•	•	•	-	•	-	-	•	•	-	•	13,332,224
Providers													
Retained Earnings, Beginning of Period	1,093,317	-	-	-	-	-	-	-	-	-	-	-	1,093,317
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings Retained Earnings, End of Period	305,268 1,398,585	-	-	-	-	-	-	-	-	-	-		305,268 1,398,585
Netallieu Earlings, Ellu Of Period	1,350,505	-	•	-	-	-	-	-	-	•	-	-	1,330,365
Insurers	0.770.040												0.770.010
Retained Earnings, Beginning of Period	2,770,012	-	-	-	-	-	-	-	-	-	-	-	2,770,012
Premium Subsidy Underpayment Adj. Current Earnings	1.099.883	-	-	-	-	-	-	-	-	-	-	-	1,099,883
Retained Earnings, End of Period	3,869,895	-	-	-	-	-	-		-	-	-	-	3,869,895
Unfunded Deductible and Coinsurance Sub													(4.000.500)
Retained Earnings, Beginning of Period Current Earnings	(1,936,562) (73,889)	-	-	-	-	-	-	-	-	-	-	-	(1,936,562) (73,889)
Retained Earnings, End of Period	(2,010,451)				-		-	-			-		(2,010,451)
	(-,,												(=,5.0,.51)

Total Retained Earnings

16,590,253

16,590,253

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN 2004 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSE AS OF JANUARY 31, 2004

MISC REVENUE	JAN 03	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ост	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-		-		-	-	-

MISC ADMIN EXP	JAN 04	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ост	NOV	DEC	YEAR TO DATE
Bank Service Charge											-		-
Postage	12,253.37												12,253.37
LAB Audit Fee	1,450.00												1,450.00
Speed Scribe													-
UW Extension													-
NASCHIP													-
Legal Services													-
Meridian Resource Corp													-
Assembly Chief Clerk													-
Newspaper Ad													-
Permedion (Independent Review Org.)													-
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	13,703.37	-	-	-	-	-	-	-	-	-	-	-	13,703.37

Wisconsin Health Insurance Risk Sharing Plan Calendar Year 2004 Interim Reconciliation As Of January 31, 2004

Changes have been made to this report starting with the January 2004 report. These changes are detailed in note 4 of the Financial Reports Notes on page 2.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	11,093,371	-	-	-	-	-	-	-	-	-	-	-	11,093,371
Increase (Decrease) in Unpaid Medical Losses	(4,812,800)	-	-	-	-	-	-	-	-	-	-	-	(4,812,800)
Pharmacy Losses Paid or Approved for Payment	2,978,135	-	-	-	-	-	-	-	-	-	-	-	2,978,135
Increase (Decrease) in Unpaid Pharmacy Losses	8,871	-	-	-	-	-	-	-	-	-	-	-	8,871
Drug Rebates	(75,286)	-	-	-	-	-	-	-	-	-	-	-	(75,286)
Total Administrative Expenses	376,092	-	-	-	-	-	-	-	-	-	-	-	376,092
Loss Adjustment Expense Total Operating Expense	9,568,383						-			-	-		9,568,383
Total Operating Expense	9,500,505	-	-	-	-	-	-	-	-	-	-	-	9,000,000
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	36,771	-	-	-	-	-	-	-	-	-	-	-	36,771
3. Total Calendar Year Program Costs to be Split 60% 20% 20%	9,531,612	-	-	-	-	-	-	-	-	-	-	-	9,531,612
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Exclu	uding Subsidy	Costs)											
Funding Shares													
60% Policyholders	5,718,968	-	-	-	-	-	-	-	-	-	-	-	5,718,968
20% Providers	1,906,322	-	-	-	-	-	-	-	-	-	-	-	1,906,322
20% Insurers	1,906,322	-	-	-	-	-	-	-	-	-	-	-	1,906,322
5. Subsidy Funding Shares													
Premium subsidies	375,583	-	-	-	-	-	-	-	-	-	-	-	375,583
Deductible Subsidies	64,365	-	-	-	-	-	-	-	-	-	-	-	64,365
Subsidy - coinsurance out-of-pocket Max	9,524	-	-	-	-	-	-	-	-	-	-		9,524
Total Subsidies	449,472	-	-	-	-	-	-	-	-	-	-	-	439,948
Subsidy Funding Needed by Source in addition to Section 3 Funding													
Providers	224,736	-	-	-	-	-	-	-	-	-	-	-	224,736
Insurers	224,736	-	-	-	-	-	-	-	-	-	-	-	224,736
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Inclu	ding Subsidy (Costs)											
Policyholders	5,718,968	-	-	-	-	-	-	-	-	-	-	-	5,718,968
Providers	2,131,058	-	-	-	-	-	-	-	-	-	-	-	2,131,058
Insurers	2,131,058	-	-	-	-	-	-	-	-	-	-	-	2,131,058
7. Non-GPR Revenues by Source Including GPR Subsidies Under	s.20.435(4)(ah)											
Policyholders	6 740 100												6 740 100
Premium Premium and Deductible Subsidies Credited to Policyholders	6,742,123 449,472	-	-	-	-	-	-	-	-	-	-	-	6,742,123 449,472
Subtotal	7,191,595		-	-	-	<u> </u>	<u> </u>		<u> </u>		<u> </u>		7,191,595
Cubicial	7,101,000												7,101,000
Providers	2,436,326	-	-	-	_	_	_	_	-	-	_	_	2,436,326
Insurers	3,230,941	-	-	-	-	-	-	_	-	-	-	-	3,230,941
Total	12,858,862	-	-	-	-	-	-	-	-	-	-	-	12,858,862

Wisconsin Health Insurance Risk Sharing Plan Calendar Year 2004 Interim Reconciliation As Of January 31, 2004

Changes have been made to this report starting with the January 2004 report. These changes are detailed in note 4 of the Financial Reports Notes on page 2.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
8. Interim Estimate of Surplus/(Deficit) Account Balance for CY	2004			•	-				•				
Policyholders Prior Period Surplus / (Deficit)	11,859,597	-	-	-	-	-	-	-	-	-	-	-	11,859,597
Premium (Including Premium and Deductible Subsidies)	7,191,595	_	_	_	_	_	_	_	_	_	_	_	7,191,595
Less Cost	5,718,968	-	-	-	-	-	-	-	-	-	-	-	5,718,968
Less Refund of Premium Overpayment Monthly Change	1,472,627	-	-	-	-	<u> </u>	-	-	<u> </u>	-	-	-	1,472,627
, •													, ,
Ending Surplus / (Deficit)	13,332,224	-	-	-	-	-	-	-	-	-	-	-	13,332,224
Assigned Surplus to SFY 2004	46,956	-	-	-	-	_	-	-	-	-	-	-	46,956
Unassigned Surplus	13,285,268	-	-	-	-	-	-	-	-	-	-	-	13,285,268
Providers													
Prior Period Surplus / (Deficit)	1,093,317	-	-	-	-	-	-	-	-	-	-	-	1,093,317
Contribution	2,436,326	-	-	-	-	-	-	-	-	-	-	-	2,436,326
Less Cost Premium Subsidy Underpayment Adj.	2,131,058	-	-	-	-	-	-	-	-	-	-	-	2,131,058
Monthly Change	305,268	-	-	-	-	-	-	-	-	-	-	-	305,268
Ending Surplus / (Deficit)	1,398,585	_	-	-	-	-	-	-	-	-	-	-	1,398,585
Insurers													
Prior Period Surplus / (Deficit)	2,770,012	-	-	-	-	-	-	-	-	-	-	-	2,770,012
Assessment	3,230,941	_	_	_	_	_	_	_	_	_	_	_	3,230,941
Less Cost	2,131,058	-	-	-	-	-	-	-	-	-	-	-	2,131,058
Premium Subsidy Underpayment Adj. Monthly Change	1,099,883	-	-	-	-		-	-	-		-	-	1,099,883
, •													, ,
Ending Surplus / (Deficit)	3,869,895	-	-	-	<u> </u>			<u> </u>	-	-	<u> </u>	<u> </u>	3,869,895
Unfunded Deductible and Coinsurance Subsidy													
Prior Period Surplus / (Deficit)	(1,936,562)	_	-	-	-	-	-	_	-	-	-	_	(1,936,562)
Monthly Change	(73,889)	-	-	-	-	-	-	-	-	-	-	-	(73,889)
Ending Surplus / (Deficit)	(2,010,451)	-	-	-	-	-	-	-	-	-	-	-	(2,010,451)
Total HIRSP Retained Earnings	16,590,253	-	-	-	-	-	-	-	-	-	-	-	16,590,253

Wisconsin Health Insurance Risk Sharing Plan January 31, 2004 Calendar Year 2004

Changes have been made to this report starting with the January 2004 report. These changes are detailed in note 2 of the Financial Reports Notes on page 2.

Unaudited Balance Sheet

Assets	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Cash and Cash Equivalents	40,798,764	_	_	_	_	_	_	_	_	_	_	_
Other Receivables	440,887	_	_	_	_	_	_	_	_	_	_	_
Drug Rebates Receivable	532,476	_	_	_	_	_	_	_	_	-	_	_
Assessments Receivable	3,233,477	_	_	-	-	-	-	_	_	_	_	_
Prepaid Items	52,035	-	-	-	-	-	-	-	-	-	-	-
Total Assets	45,057,639	-	-	-	-	-	-	-	-	-	-	-
												_
Liabilities and Fund Equity Liabilities:												
Unpaid Medical loss Liabilities	13,706,091	_	_	_	_	_	_	_	_	_	_	_
Unpaid Prescription Drug Loss Liabilities	1,712,604	_	_	_	_	_	_	_	_	_	_	_
Unpaid Loss Adjustment Expense	660,000	_	_	-	-	-	-	_	_	-	-	_
Unearned Premiums	11,026,649	-	-	-	-	_	-	-	-	-	-	-
Unearned Assessments	495,774	-	-	-	-	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	866,268	-	-	-	-	-	-	-	-	-	-	-
Total Liabilities	28,467,386	-	-	-	-	-	-	-	-	-	-	-
Fund Facility												
Fund Equity: Policyholder	13,332,224											
Providers	1,398,585	_	_	-	-	-	-	_	_	_	_	-
Insurers	3,869,895	_	_	-	-	-	-	_	_	_	_	-
Unfunded Deductible and Coinsurance Subsidy	(2,010,451)	-	-	-	-	-	-	-	-	-	-	-
Total Retained Earnings	16,590,253	-	-	-	-	-	-	-	-	-	-	-
-												
Total Liabilities and Fund Equity	45,057,639	-	-	-	-	-	-	-	-	-	-	

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN EARNED PREMIUM FISCAL YEAR 2004

EAR	RNED PREMIUM
MONTH	FY 04
JUL	6,349,900
AUG	6,525,239
SEP	6,571,755
OCT	6,621,665
NOV	6,657,766
DEC	6,681,277
JAN	6,742,123
FEB	
MAR	
APR	
MAY	
JUN	
TOTAL	\$46,149,725

Prepared 2/18/2004

Wisconsin Health Insurance Risk Sharing Plan Assessment Status

	Total Ass for 1/1/04			1st Insta Due 2/			2nd Inst Due 4/	
Period	Payments	A/R		Payments	A/R		Payments	A/R
Ending	Received	Balance		Received	Balance		Received	Balance
01/10/04	- INCOCIVED	19.385.648.54		-	9.692.824.27		Received	9.692.824.27
01/17/04	-	19,385,648.54		_	9,692,824.27			9,692,824.27
01/24/04	71,685.25	19,313,963.29		35,842.61	9,656,981.66		35,842.64	9,656,981.63
01/31/04	546,205.64	18,767,757.65		330,509.13	9,326,472.53		215,696.51	9,441,285.12
Jan Total	\$ 617,890.89		\$	366,351.74	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$		-,,
02/07/04	1							
02/14/04								
02/21/04								
02/29/04								
Feb Total	\$ -	<u> </u>	\$	-		\$	-	
03/06/04								
03/13/04								
03/20/04								
03/27/04								
03/31/04								
Mar Total	\$ -		\$	_		\$	_	
	<u> </u>		<u> </u>					
04/10/04								
04/17/04								
04/24/04								
04/30/04								
Apr Total	\$ -	_	\$	-		\$	-	
05/08/04				1				
05/15/04								
05/22/04								
05/31/04								
May Total	\$ -		\$	-		\$	-	
06/05/04	 						1	
06/03/04			-			-		
06/12/04						-		
06/26/04				+				
06/30/04				+				
Jun Total	\$ -		\$	_		\$	_	
Juli Tutal	-		Ψ	-		φ	-	

Grand Total <u>\$ 617,890.89</u> <u>\$18,767,757.65</u>

Prepared 2/18/2004 15

\$ 366,351.74 \$ 9,326,472.53

\$ 251,539.15 \$ 9,441,285.12

Monthly Applicant Activity January Month End, 2004

	Plan 1A	Plan 1B	Plan 2	Total
Number of Applications Pending December Month End*, 2003	342	307	36	685
Number of Applications Received in January, 2004	277	315	16	608
Number of Applications Rejected in January, 2004	31	11	4	46
Number of Applications Closed in January, 2004	26	24	1	51
Number of Applications Pending January End*, 2004 **	316	318	33	667
Number of Applications Approved in January, 2004	246	269	14	529

^{*} The above numbers are based on Month End which is the last Friday in the Month. January data includes 12-27-03 to 1-30-04.

^{**}Pending applications include applications received and not processed and applications pending for more information.

	Plan 1A	Plan 1B	Plan 2	Total
Detail of Applications Rejected				
Insufficient premium submitted	18	3	1	22
Eligible for Group Health Plan	2	7	0	9
Current Medicaid coverage	10	1	2	13
Previous HIRSP <12 months ago	1	0	0	1
Other	0	0	1	1
Subtotal	31	11	4	46
Detail of Applications Closed				
Applicant Request	2	5	0	7
Proper eligibility requested; never received	8	8	0	16
Application data requested; never received	16	11	1	28
Subtotal	26	24	1	51

Applicant Eligibility Determination January 2004

A.	Medicare Eligible	14
B.	HIV +	4
C.	Eligible Individual	226
D.	Letter of Medical Eligibility	285
	1. Notice of Rejection by:	
	Blue Cross & Blue Shield United of Wisconsin Wisconsin Physicians Service Insurance Humana Insurance Company Fortis Benefits Insurance Golden Rule Insurance Company Mega Life and Health Insurance American Family Security Health Plan Midwest National Life Insurance Valley Health Plan American Medical Security Group Pekin Life Insurance Atrium Health Plan Dean Insurance Empire Fire and Marine Midwest Security Life Insurance American National Life Insurance American Republic John Alden Physicians Mutual Unity World Insurance Celtic Life Insurance Group Health Cooperative HMO Physicians Plus Insurance United HealthCare	60 29 28 23 23 16 14 7 7 6 6 3 3 3 2 2 2 2 2 2 2 1 1 1 1
	3. Notice of Premium increase due to a Health Reason	1
Total		529

RESTATED POLICIES IN FORCE - AS OFJANUARY 2004 MONTH END

	Total Subsidy		Т	otal Non	n-Subsidy			Combined Total*			
	Plan 1A	Plan 2	Total	Plan 1A	Plan 1B	Plan 2	Total	Plan 1A	Plan 1B	Plan 2	Total
February, 2003	3,030	818	3,848	5,235	6,369	905	12,509	8,265	6,369	1,723	16,357
March, 2003	3,055	822	3,877	5,338	6,502	913	12,753	8,393	6,502	1,735	16,630
April, 2003	3,053	825	3,878	5,329	6,559	918	12,806	8,382	6,559	1,743	16,684
May, 2003	3,073	825	3,898	5,420	6,667	920	13,007	8,493	6,667	1,745	16,905
June, 2003	3,075	821	3,896	5,526	6,799	942	13,267	8,601	6,799	1,763	17,163
July, 2003	3,090	805	3,895	5,374	6,809	929	13,112	8,464	6,809	1,734	17,007
August, 2003	3,116	802	3,918	5,375	6,952	928	13,255	8,491	6,952	1,730	17,173
September, 2003	3,155	811	3,966	5,379	7,113	926	13,418	8,534	7,113	1,737	17,384
October, 2003	3,189	813	4,002	5,267	7,213	919	13,399	8,456	7,213	1,732	17,401
November, 2003	3,203	811	4,014	5,269	7,319	921	13,509	8,472	7,319	1,732	17,523
December, 2003	3,192	805	3,997	5,292	7,350	933	13,575	8,484	7,350	1,738	17,572
January, 2004	3,141	810	3,951	4,941	7,842	947	13,730	8,082	7,842	1,757	17,681

Detail of Total Subsidy Policies in Force

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
February, 2003	12,509	580	600	729	1,353	586	16,357
March, 2003	12,753	578	605	740	1,364	590	16,630
April, 2003	12,806	585	605	741	1,368	579	16,684
May, 2003	13,007	582	608	748	1,382	578	16,905
June, 2003	13,267	585	612	749	1,380	570	17,163
July, 2003	13,112	550	579	731	1,418	617	17,007
August, 2003	13,255	548	582	733	1,447	608	17,173
September, 2003	13,418	551	593	744	1,473	605	17,384
October, 2003	13,399	555	601	743	1,499	604	17,401
November, 2003	13,509	558	597	751	1,507	601	17,523
December, 2003	13,575	555	592	740	1,507	603	17,572
January, 2004	13,730	529	586	740	1,532	564	17,681

^{*}Level 0 = Income > \$25,000

^{*}Level 1 = Income \$17,000 - \$19,999

^{*}Level 2 = Income \$14,000 - \$16,999

^{*}Level 3 = Income \$10,000 - \$13,999

^{*}Level 4 = Income <=\$9,999

^{*}Level 5 = Income \$20,000 - \$24,999

Total Policies in Force by Plan, Gender, & Age Group as of January 31, 2004

Male

Plan	Gender	Age Group	# Policy holders
1A	Male	0 - 24	416
1A	Male	25 - 29	177
1A	Male	30 - 34	186
1A	Male	35 - 39	287
1A	Male	40 - 44	401
1A	Male	45 - 49	517
1A	Male	50 - 54	527
1A	Male	55 - 59	497
1A	Male	60 - 64	504
1A	Male	65+	5
		Total:	3,517

Plan	Gender	Age Group	# Policy holders
1B	Male	0 - 24	196
1B	Male	25 - 29	40
1B	Male	30 - 34	61
1B	Male	35 - 39	132
1B	Male	40 - 44	241
1B	Male	45 - 49	360
1B	Male	50 - 54	545
1B	Male	55 - 59	761
1B	Male	60 - 64	1,200
1B	Male	65+	3
		Total:	3,539

Plan	Gender	Age Group	# Policy holders
2	Male	0 - 24	4
2	Male	25 - 29	15
2	Male	30 - 34	14
2	Male	35 - 39	39
2	Male	40 - 44	75
2	Male	45 - 49	123
2	Male	50 - 54	122
2	Male	55 - 59	107
2	Male	60 - 64	103
2	Male	65+	130
		Total:	732

Plan	Gender	Age Group	# Policy holders
1A	Female	0 - 18	160
1A	Female	19 - 24	204
1A	Female	25 - 29	191
1A	Female	30 - 34	187
1A	Female	35 - 39	243
1A	Female	40 - 44	349
1A	Female	45 - 49	490
1A	Female	50 - 54	658
1A	Female	55 - 59	869
1A	Female	60 - 64	1,200
1A	Female	65+	14
		Total:	4,565

Plan	Gender	Age Group	# Policy holders
1B	Female	0 - 18	76
1B	Female	19 - 24	47
1B	Female	25 - 29	37
1B	Female	30 - 34	68
1B	Female	35 - 39	130
1B	Female	40 - 44	263
1B	Female	45 - 49	424
1B	Female	50 - 54	587
1B	Female	55 - 59	969
1B	Female	60 - 64	1,696
1B	Female	65+	6
	·	Total:	4,303

Plan	Gender	Age Group	# Policy holders
2	Female	19 - 24	3
2	Female	25 - 29	6
2	Female	30 - 34	14
2	Female	35 - 39	29
2	Female	40 - 44	67
2	Female	45 - 49	95
2	Female	50 - 54	147
2	Female	55 - 59	154
2	Female	60 - 64	209
2	Female	65+	301
		Total:	1,025

Total Policies in Force by Plan, Gender, Zone & Age Group as of January 31, 2004

Male

Plan	Zone	Gender	Age Group	# Policy holders
1A	1	Male	0 - 24	29
1A	1	Male	25 - 29	20
1A	1	Male	30 - 34	17
1A	1	Male	35 - 39	31
1A	1	Male	40 - 44	33
1A	1	Male	45 - 49	46
1A	1	Male	50 - 54	41
1A	1	Male	55 - 59	33
1A	1	Male	60 - 64	35
			Total:	285

Plan	Zone	Gender	Age Group	# Policy holders
1A	2	Male	0 - 24	130
1A	2	Male	25 - 29	52
1A	2	Male	30 - 34	62
1A	2	Male	35 - 39	81
1A	2	Male	40 - 44	121
1A	2	Male	45 - 49	138
1A	2	Male	50 - 54	146
1A	2	Male	55 - 59	139
1A	2	Male	60 - 64	135
1A	2	Male	65+	1
			Total:	1,005

Plan	Zone	Gender	Age Group	# Policy holders
1A	3	Male	0 - 24	257
1A	3	Male	25 - 29	105
1A	3	Male	30 - 34	107
1A	3	Male	35 - 39	175
1A	3	Male	40 - 44	247
1A	3	Male	45 - 49	333
1A	3	Male	50 - 54	340
1A	3	Male	55 - 59	325
1A	3	Male	60 - 64	334
1A	3	Male	65+	4
		-	Total:	2,227

Plan	Zone	Gender	Age Group	# Policy holders
1A	1	Female	0 - 18	5
1A	1	Female	19 - 24	15
1A	1	Female	25 - 29	24
1A	1	Female	30 - 34	18
1A	1	Female	35 - 39	13
1A	1	Female	40 - 44	26
1A	1	Female	45 - 49	40
1A	1	Female	50 - 54	74
1A	1	Female	55 - 59	73
1A	1	Female	60 - 64	91
1A	1	Female	65+	1
			Total:	380

Plan	Zone	Gender	Age Group	# Policy holders
1A	2	Female	0 - 18	44
1A	2	Female	19 - 24	55
1A	2	Female	25 - 29	53
1A	2	Female	30 - 34	65
1A	2	Female	35 - 39	89
1A	2	Female	40 - 44	105
1A	2	Female	45 - 49	142
1A	2	Female	50 - 54	161
1A	2	Female	55 - 59	251
1A	2	Female	60 - 64	343
1A	2	Female	65+	4
			Total:	1,312

Plan	Zone	Gender	Age Group	# Policy holders
1A	3	Female	0 - 18	111
1A	3	Female	19 - 24	134
1A	3	Female	25 - 29	114
1A	3	Female	30 - 34	104
1A	3	Female	35 - 39	141
1A	3	Female	40 - 44	218
1A	3	Female	45 - 49	308
1A	3	Female	50 - 54	423
1A	3	Female	55 - 59	545
1A	3	Female	60 - 64	766
1A	3	Female	65+	9
			Total:	2,873

Total Policies in Force by Plan, Gender, Zone & Age Group as of January 31, 2004

Male

Plan	Zone	Gender	Age Group	# Policy holders
1B	1	Male	0 - 24	13
1B	1	Male	25 - 29	4
1B	1	Male	30 - 34	6
1B	1	Male	35 - 39	18
1B	1	Male	40 - 44	22
1B	1	Male	45 - 49	18
1B	1	Male	50 - 54	41
1B	1	Male	55 - 59	43
1B	1	Male	60 - 64	74
			Total:	239

Plan	Zone	Gender	Age Group	# Policy holders
1B	2	Male	0 - 24	67
1B	2	Male	25 - 29	11
1B	2	Male	30 - 34	17
1B	2	Male	35 - 39	37
1B	2	Male	40 - 44	75
1B	2	Male	45 - 49	99
1B	2	Male	50 - 54	166
1B	2	Male	55 - 59	202
1B	2	Male	60 - 64	333
1B	2	Male	65+	3
			Total:	1,010

Plan	Zone	Gender	Age Group	# Policy holders
1B	3	Male	0 - 24	116
1B	3	Male	25 - 29	25
1B	3	Male	30 - 34	38
1B	3	Male	35 - 39	77
1B	3	Male	40 - 44	144
1B	3	Male	45 - 49	243
1B	3	Male	50 - 54	338
1B	3	Male	55 - 59	516
1B	3	Male	60 - 64	793
			Total:	2,290

Plan	Zone	Gender	Age Group	# Policy holders
1B	1	Female	0 - 18	5
1B	1	Female	19 - 24	2
1B	1	Female	25 - 29	3
1B	1	Female	30 - 34	10
1B	1	Female	35 - 39	7
1B	1	Female	40 - 44	14
1B	1	Female	45 - 49	28
1B	1	Female	50 - 54	32
1B	1	Female	55 - 59	66
1B	1	Female	60 - 64	102
1B	1	Female	65+	1
			Total:	270

Plan	Zone	Gender	Age Group	# Policy holders
1B	2	Female	0 - 18	25
1B	2	Female	19 - 24	11
1B	2	Female	25 - 29	10
1B	2	Female	30 - 34	18
1B	2	Female	35 - 39	49
1B	2	Female	40 - 44	73
1B	2	Female	45 - 49	143
1B	2	Female	50 - 54	180
1B	2	Female	55 - 59	268
1B	2	Female	60 - 64	483
1B	2	Female	65+	2
			Total:	1,262

Plan	Zone	Gender	Age Group	# Policy holders
1B	3	Female	0 - 18	46
1B	3	Female	19 - 24	34
1B	3	Female	25 - 29	24
1B	3	Female	30 - 34	40
1B	3	Female	35 - 39	74
1B	3	Female	40 - 44	176
1B	3	Female	45 - 49	253
1B	3	Female	50 - 54	375
1B	3	Female	55 - 59	635
1B	3	Female	60 - 64	1,111
1B	3	Female	65+	3
			Total:	2.771

Total Policies in Force by Plan, Gender, Zone & Age Group as of January 31, 2004

Male

Plan	Zone	Gender	Age Group	# Policy holders
2	1	Male	0 - 24	1
2	1	Male	25 - 29	1
2	1	Male	30 - 34	5
2	1	Male	35 - 39	11
2	1	Male	40 - 44	16
2	1	Male	45 - 49	20
2	1	Male	50 - 54	19
2	1	Male	55 - 59	12
2	1	Male	60 - 64	10
2	1	Male	65+	7
			Total:	102

Plan	Zone	Gender	Age Group	# Policy holders
2	1	Female	19 - 24	1
2	1	Female	25 - 29	1
2	1	Female	30 - 34	2
2	1	Female	35 - 39	4
2	1	Female	40 - 44	12
2	1	Female	45 - 49	15
2	1	Female	50 - 54	20
2	1	Female	55 - 59	8
2	1	Female	60 - 64	13
2	1	Female	65+	24
		-	Total:	100

Plan	Zone	Gender	Age Group	# Policy holders
2	2	Male	0 - 24	1
2	2	Male	25 - 29	3
2	2	Male	30 - 34	5
2	2	Male	35 - 39	10
2	2	Male	40 - 44	16
2	2	Male	45 - 49	35
2	2	Male	50 - 54	40
2	2	Male	55 - 59	27
2	2	Male	60 - 64	31
2	2	Male	65+	40
			Total:	208

Plan	Zone	Gender	Age Group	# Policy holders
2	2	Female	19 - 24	1
2	2	Female	25 - 29	2
2	2	Female	30 - 34	6
2	2	Female	35 - 39	13
2	2	Female	40 - 44	21
2	2	Female	45 - 49	31
2	2	Female	50 - 54	42
2	2	Female	55 - 59	46
2	2	Female	60 - 64	62
2	2	Female	65+	84
			Total:	308

Plan	Zone	Gender	Age Group	# Policy holders
2	3	Male	0 - 24	2
2	3	Male	25 - 29	11
2	3	Male	30 - 34	4
2	3	Male	35 - 39	18
2	3	Male	40 - 44	43
2	3	Male	45 - 49	68
2	3	Male	50 - 54	63
2	3	Male	55 - 59	68
2	3	Male	60 - 64	62
2	3	Male	65+	83
			Total:	422

Plan	Zone	Gender	Age Group	# Policy holders
2	3	Female	19 - 24	1
2	3	Female	25 - 29	3
2	3	Female	30 - 34	6
2	3	Female	35 - 39	12
2	3	Female	40 - 44	34
2	3	Female	45 - 49	49
2	3	Female	50 - 54	85
2	3	Female	55 - 59	100
2	3	Female	60 - 64	134
2	3	Female	65+	193
			Total:	617

Total Subsidy/Non-Subsidy Restated for January 31, 2004

Plan		# Policyholders
1A	Non-Subsidized	4,941
1A	Subsidized	3,141
1B	Non-Subsidized	7,842
2	Non-Subsidized	947
2	Subsidized	810
	Total	: 17,681

Total Subsidy by Level Restated for January 31, 2004

Subsidy Level	# Policyholders
Level 0	13,730
Level 1	529
Level 2	586
Level 3	740
Level 4	1,532
Level 5	564
Total:	17,681

Total Policies in Force by Zone, Plan and Subsidy Restated for January 31, 2004

	# Policyholders
Plan 1A, Zone 1, Non-Subsidized	351
Plan 1A, Zone 1, Subsidized	314
Plan 1A, Zone 2, Non-Subsidized	1,494
Plan 1A, Zone 2, Subsidized	823
Plan 1A, Zone 3, Non-Subsidized	3,096
Plan 1A, Zone 3, Subsidized	2,004
Plan 1B, Zone 1, Non-Subsidized	509
Plan 1B, Zone 2, Non-Subsidized	2,272
Plan 1B, Zone 3, Non-Subsidized	5,061
Plan 2, Zone 1, Non-Subsidized	101
Plan 2, Zone 1, Subsidized	101
Plan 2, Zone 2, Non-Subsidized	280
Plan 2, Zone 2, Subsidized	236
Plan 2, Zone 3, Non-Subsidized	566
Plan 2, Zone 3, Subsidized	473
Total	: 17,681

Customer Service Monthly Operating Report January, 2004

Jan-04	Calls	Calls	#	%	Average	Shortest	Longest	Average
Week Ending	Offered	Handled	Abandoned	Abandoned	Wait	Wait	Wait	Talk
2-Jan	1,567	1,392	175	11.2%	5.18	0.00	9.47	3.39
9-Jan	2,673	2,327	346	12.9%	5.18	0.00	10.02	3.52
16-Jan	2,729	2,427	302	11.1%	5.25	0.00	13.23	3.35
23-Jan	2,121	1,848	273	12.9%	6.10	0.00	11.25	3.57
30-Jan	2,691	2,407	284	10.6%	3.87	0.00	13.30	3.18
Total	11,781	10,401	1,380	11.7%	5.12	0.00	13.30	3.40

Historical	Calls	Calls	#	%	Average	Shortest	Longest	Average
03-04 Stats	Offered	Handled	Abandoned	Abandoned	Wait	Wait	Wait	Talk
Jan-03	11,488	10,080	1,408	12.3%	4.89	0.00	14.59	2.53
Feb-03	9,689	9,043	646	6.7%	2.86	0.00	7.72	2.48
Mar-03	11,348	10,352	996	8.8%	3.62	0.00	11.26	2.37
Apr-03	10,585	9,577	1,008	9.5%	3.97	0.00	9.54	2.31
May-03	11,741	10,677	1,064	9.1%	3.74	0.00	11.73	2.38
Jun-03	11,073	9,556	1,517	13.7%	5.30	0.00	12.73	2.43
Jul-03	9,421	8,260	1,161	12.3%	4.49	0.00	12.31	2.46
Aug-03	11,590	10,859	731	6.3%	2.81	0.00	9.69	2.54
Sep-03	10,203	8,894	1,309	12.8%	4.80	0.00	10.87	2.61
Oct-03	13,226	11,261	1,965	14.9%	5.39	0.00	18.38	2.62
Nov-03	8,836	7,280	1,556	17.6%	6.59	0.00	20.02	3.16
Dec-03	9,053	7,741	1,312	14.5%	5.78	0.00	15.11	3.56
Jan-04	11,781	10,401	1,380	11.7%	5.12	0.00	13.30	3.40

Most Commonly Asked Questions to Customer Service - January 2004

- 1. Is this service payable?
- 2. Was a specific claim approved?
- 3. What benefits does HIRSP cover?
- 4. What are HIRSP premiums and drug coverage?

		Writ	ten Correspo	ndence - Jar	nuary 2004			
	Beginning Inventory	Received	Completed	< 10 days	Inventory 10-30 days	Ending Inventory		
Customer Srvc	38	210	248	0	0	0	0	
Enrollment	0	487	487	0	0	0	0	
Underwriting	26	65	59	10	14	8	32	

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN CLAIMS PROCESSED

Claims that have finalized to payment or denial during the month

Clain	type/Description	Jan-03	Feb-03	Mar-03	Apr-03	May-03	Jun-03	Jul-03	Aug-03	Sep-03	Oct-03	Nov-03	Dec-03	YTD Total
CT10	Pharmacy (Non-PBM)**	5	15	0	1	34	1	10	2	2	1	0	0	71
CT10	Pharmacy (PBM)***	224	54	131	218	3	50	11	53	31	0	0	0	775
WP	Wellpoint Pharmacy ****	49,812	51,356	52,987	52,057	80,707 (1)	54,288	55,136	55,060	56,913	87,190 ⁽¹⁾	59,373	61,341	716,220
CT19	Pharmacy Adjustments (Non-PBM)**	3	4	6	2	0	0	0	0	0	0	0	0	15
CT19	Pharmacy Adj. (PBM) ***	0	0	0	0	0	0	0	0	0	0	0	0	0
WP	Wellpoint Reversals *****	-2,332	-2,444	-2,447	-2,337	-3,638	-2,489	-2,415	-2,537	-2,566	-4,026	-2,846	-2,869	-32,946
CT20	Physicians	23,478	21,121	20,379	18,370	24,588	19,996	19,487	24,257	18,355	24,187	26,047	23,229	263,494
CT23	Outpatient Hospital	3,958	3,702	3,430	3,406	4,309	3,757	3,499	4,356	3,438	3,992	4,537	4,774	47,158
CT24	Miscellaneous	1,833	1,605	1,591	1,290	1,631	1,492	1,594	1,654	1,621	1,907	1,834	2,222	20,274
CT30	Professional Crossovers	4,625	4,102	4,098	3,282	4,371	3,639	3,605	4,351	3,479	3,996	4,394	3,544	47,486
CT31	Outpatient Crossovers	931	800	837	766	891	825	727	936	819	1,128	1,034	1,236	10,930
CT39	Professional Adjustments	178	250	512	277	431	216	509	452	331	200	181	237	3,774
CT40	Inpatient Hospital	391	354	286	290	384	342	304	348	244	384	376	408	4,111
CT41	Nursing Home	38	22	44	15	26	30	25	18	20	38	25	19	320
CT49	Inpatient Hospital Adjustments	7	9	8	15	11	16	31	23	18	36	7	8	189
CT50	Inpatient Hospital Crossovers	85	90	77	49	92	72	61	102	69	63	73	65	898
CT51	Nursing Home Crossovers	10	5	15	12	25	12	21	20	12	8	3	9	152
CT59	Nursing Home Adjustments	0	0	0	2	0	1	0	0	0	0	0	0	3
Total c	aims processed*	83,246	81,045	81,954	77,715	113,865	82,248	82,605	89,095	82,786	119,104	95,038	94,223	1,082,924

Clain	type/Description	Jan-04	Feb-04	Mar-04	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	YTD Total
CT10	Pharmacy (Non-PBM)**	0												0
CT10	Pharmacy (PBM)***	0												0
WP	Wellpoint Pharmacy ****	58,899												58,899
CT19	Pharmacy Adjustments (Non-PBM)**	0												0
CT19	Pharmacy Adj. (PBM) ***	0												0
WP	Wellpoint Reversals *****	-2,475												-2,475
CT20	Physicians	33,839												33,839
CT23	Outpatient Hospital	5,585												5,585
CT24	Miscellaneous	2,216												2,216
CT30	Professional Crossovers	5,805												5,805
CT31	Outpatient Crossovers	1,526												1,526
CT39	Professional Adjustments	469												469
CT40	Inpatient Hospital	598												598
CT41	Nursing Home	41												41
CT49	Inpatient Hospital Adjustments	6												6
CT50	Inpatient Hospital Crossovers	125												125
CT51	Nursing Home Crossovers	14												14
CT59	Nursing Home Adjustments	0												0
Total c	laims processed*	106,648	0	0	0	0	0	0	0	0	0	0	0	106,648

^{*}The totals include paper and EMC claims. PBM claims are included in the totals starting with August 2001. In the PBM environment, each prescription processed by the PBM is counted as one claim where, previously, a claim may have included multiple prescriptions. Therefore, due to the change in pharmacy claims processing, the volume of claims

^{**} Pharmacy non-PBM claims are for dates of service prior to August 1, 2001.

^{***} Pharmacy PBM claims are for dates of service between August 1, 2001 and December 31, 2001; claims were submitted through the Wellpoint system, but paid by the Fiscal Agent.

^{****} Wellpoint Pharmacy claims are processed solely through the Wellpoint system under the new co-pay guidelines and account for all prescriptions filled beginning January 1, 2002.

^{******}Wellpoint reversals will always negate a Wellpoint pharmacy claim beginning January 1, 2002.

⁽¹⁾ Increase in claims count is due to an additional pay period. This month includes 3 pay periods.

AVERAGE CLAIMS PROCESSING DAYS

Claim type/Description*	Jan-03	Feb-03	Mar-03	Apr-03 **	May-03	Jun-03	Jul-03	Aug-03	Sep-03	** Oct-03	Nov-03	Dec-03	Jan-04
CT10 Pharmacy	404	306	570	522	16	511	154	511	632	2	0	0	0
CT19 Pharmacy Adjustments	251	6	57	6	0	0	0	0	0	0	0	0	0
CT20 Physicians	12	13	9	9	11	12	14	14	13	15	15	17	16
CT23 Outpatient Hospital	12	13	11	9	12	12	12	14	12	15	13	14	13
CT24 Miscellaneous	13	13	11	12	14	15	15	19	15	18	15	16	18
CT30 Professional Crossovers	10	10	7	7	9	9	10	11	11	13	13	15	15
CT31 Outpatient Crossovers	13	11	12	12	15	15	16	17	15	18	16	18	17
CT39 Professional Adjustments	10	9	9	11	10	14	12	11	13	22	37	44	43
CT40 Inpatient Hospital	14	17	12	17	20	20	20	16	15	20	16	17	20
CT41 Nursing Home	14	15	6	19	17	10	15	13	17	18	16	14	18
CT49 Inpatient Hospital Adjustments	8	7	6	15	18	27	17	12	15	17	37	48	44
CT50 Inpatient Hospital Crossovers	8	11	8	8	10	8	10	11	10	13	10	12	12
CT51 Nursing Home Crossovers	10	10	8	10	9	12	10	16	12	21	20	12	21
CT59 Nursing Home Adjustments	0	0	0	16	0	9	0	0	0	0	0	0	0
Average for the Month	13	13	12	11	12	13	13	14	13	*** 16	13	**** 16	**** 16

^{*}A "0" days to process indicates there were no claims submitted for that claim type in that month.

Wellpoint pharmacy claims processed solely through the Wellpoint system are not included in

this report for prescriptions filled beginning January 1, 2002.

^{**} No Wellpoint paper claims were paid in May and October. This number includes only non-PBM claims.

^{***}Processing of claims received October 1, 2003 and after did not begin until October 13, 2003 due to HIPAA changes, making the average processing days higher than normal.

^{****}HIPAA changes and a high volume of claims submitted made the average processing days higher than normal

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN HIRSP MONTH END CLAIMS INVENTORY

Claim Type/ Description	Number of clair	Number of claims to be keyed		Claims in the system being processed (includes claims waiting to be keyed)	
Joint Type, Bescription	Total			Over 30 days old	
January 2003 - All Claim Types	3,692	0	7,159	710	
February 2003 - All Claim Types	2,161	0	4,853	86	
March 2003 - All Claim Types	1,085	0	4,398	205	
April 2003 - All Claim Types	1,600	0	5,336	1,041	
May 2003 - All Claim Types	1,926	0	6,373	1,557	
June 2003 - All Claim Types	2,689	0	7,495	1,345	
July 2003 - All Claim Types	710	0	4,670	1,264	
August 2003 - All Claim Types	2,324	0	5,614	870	
September 2003 - All Claim Types	2,638	0	6,613	1,094	
October 2003 - All Claim Types	6,321	0	10,134	1,554	
November 2003 - All Claim Types	5,195	0	9,044	1,229	
December 2003 - All Claim Types	11,177	0	14,939	1,508	
January 2004 - All Claim Types	9,242	0	13,832	1,837	

December 2003

Claim Type / Description		Number of claims to be keyed		Claims in the system being processed (includes claims waiting to be keyed)	
		Total	Over 30 days old	Total	Over 30 days old
CT10	Pharmacy (Non-PBM)	0	0	0	0
CT19	Pharmacy Adjustments (Non-PBM)	0	0	0	0
CT20	Physicians	8,671	0	10,967	958
CT23	Outpatient Hospital	602	0	1310	300
CT24	Miscellaneous	370	0	586	57
CT30	Professional Crossovers	1156	0	1423	95
CT31	Outpatient Crossovers	292	0	361	32
CT39	Professional Adjustments	0	0	25	25
CT40	Inpatient Hospital	72	0	234	35
CT41	Nursing Home	1	0	10	2
CT49	Inpatient Hospital Adjustments	0	0	0	0
CT50	Inpatient Hospital Crossovers	10	0	15	3
CT51	Nursing Home Crossovers	3	0	8	1
CT59	Nursing Home Adjustments	0	0	0	0
All Claim	Types	11,177	0	14,939	1,508

January 2004

Claim Type / Description		Number of claims to be keyed		Claims in the system being processed (includes claims waiting to be keyed)	
	" .	Total	Over 30 days old	Total	Over 30 days old
CT10	Pharmacy (Non-PBM)	0	0	0	0
CT19	Pharmacy Adjustments (Non-PBM)	0	0	0	0
CT20	Physicians	7,071	0	9,983	1,291
CT23	Outpatient Hospital	377	0	1026	244
CT24	Miscellaneous	442	0	781	47
CT30	Professional Crossovers	1091	0	1414	65
CT31	Outpatient Crossovers	218	0	313	32
CT39	Professional Adjustments	0	0	124	114
CT40	Inpatient Hospital	36	0	159	33
CT41	Nursing Home	0	0	12	3
CT49	Inpatient Hospital Adjustments	0	0	1	1
CT50	Inpatient Hospital Crossovers	7	0	18	6
CT51	Nursing Home Crossovers	0	0	0	0
CT59	Nursing Home Adjustments	0	0	1	1
All Claim	Types	9,242	0	13,832	1,837

Claims Denied Report January 2004

* Jan-0	3 10,945
Feb-0	10,325
Mar-0	9,628
Apr-0	3 8,311
May-	11,459
Jun-0	3 9,056
Jul-0	3 9,422
Aug-0	10,983
Sep-0	7,731
Oct-0	3 20,036
Nov-	16,651
Dec-	13,878 ***
Jan-(4 18,250

^{*}Claims denied by the PBM are not included. See page 30 for claims denied by the PBM.

***Denied claims increased due to HIPAA changes. Providers
are not following HIPAA billing instructions.

January 2004 - Reason Detail

** Top Reasons for Denial	Volume	
A22 - Billing provider number not on file	8,074	
A02 - Policyholder number not on file	5,551	
97 - Claim indicator missing or invalid	4,706	
401 - Duplicate service denial - professional claims	4,139	
449 - Duplicate service denial -hospital claims	3,351	
177 - Place of service invalid	2,756	
960 - Medicare paid more than HIRSP would allow - all other Medicare crossover claims	2,405	
187 - Procedure to suspend for medical review	2,340	
380 - Pre-x	1,879	
191 - Procedure/service not a HIRSP benefit	1,225	
172 - Policyholder not eligible on service date	921	
A51 - Total days stay	885	

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN PHARMACY CLAIMS DENIED BY PBM

Claims Denied Report January 2004

Feb-03	6,482	
Mar-03	6,698	
Apr-03	6,397	
May-03	9,785	
Jun-03	6,942	
Jul-03	7,020	
Aug-03	6,981	
Sep-03	7,427	
Oct-03	11,825	
Nov-03	7,951	
Dec-03	8,271	
Jan-04	8,470	

January 2004 - Reason Detail

* Top Reasons for Denial	Volume	
47 - Early refill	4,308	
35 - Prior Authorization required	3,245	
29 - Invalid/excessive days supply	1,666	
03 - Date filled beyond cancel / ID card expired	909	
05 - Non-covered prescription item	849	
04 - Duplicate claim	431	
22 - Non legend items not covered	325	
07 - Invalid/excessive quantity	182	
27 - Invalid/missing patient birthdate	177	
21 - Invalid/missing national drug code	105	

^{*}In the PBM environment, each prescription processed is counted as one claim.

Claims Accuracy Performance* January 2004

		CLAIM	PAYMENTS	CORRECT	ACCURACY
MONTH	CLAIMS	PAYMENTS	REVIEWED	PAYMENT	RATE
Feb-03	32,079	\$4,466,928	\$86,044	\$86,044	100.00%
Mar-03	31,283	\$3,519,001	\$9,160	\$9,160	100.00%
Apr-03	27,777	\$3,860,894	\$24,483	\$24,483	100.00%
May-03	36,796	\$5,456,980	\$34,958	\$34,958	100.00%
Jun-03	30,450	\$5,538,130	\$111,373	\$111,373	100.00%
Jul-03	30,684	\$4,995,826	\$41,392	\$41,392	100.00%
Aug-03	36,572	\$4,006,464	\$119,862	\$119,862	100.00%
Sep-03	28,439	\$4,246,421	\$53,689	\$53,663	99.95%
Oct-03	35,942	\$3,517,547	\$66,842	\$70,368	**94.67%
Nov-03	38,514	\$3,779,227	\$123,352	\$122,765	99.52%
Dec-03	35,756	\$4,781,794	\$133,185	\$133,192	99.99%
Jan-04	50,224	\$5,313,619	\$60,565	\$60,379	99.69%

^{*} Claims processed through PBM are not included in the performance statistics.

^{**}Claim payment accuracy is lower than normal due to a keying error on one inpatient claim.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN APPEALS AND GRIEVANCE SUMMARY JANUARY, 2004

CLAIM APPEALS

TOTAL CLAIM APPEALS RECEIVED	70
REINSTATEMENTS	43
PRE-X CLAIM DENIAL	5
PA DENIAL	13
CANCELLATION REQUESTS	1
WAIVE PRE-X	3
PLAN CHANGE REQUESTS	1
NONCERTIFIED PROVIDERS	1
LATE BILLING	2
OTHER	1
TOTAL CLAIMS/REINSTATEMENTS CLOSED	62
CLAIM APPEALS AVERAGE NUMBER OF DAYS	2.97
GRIEVANCES	
GRIEVANCE COMMITTEE REVIEW:	10
WAIVE PRE-X	4
REINSTATEMENTS	1
CHANGE EFFECTIVE DATE	1
CANCELLATION/PREMIUM REFUND	1
PLAN CHANGE REQUEST	1
PRE-EXISTING CLAIM DENIALS	2